

PART B - FEE(S) TRANSMITTAL

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SEP 28 2007

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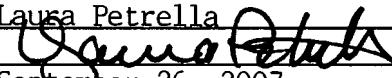
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7590 08/14/2007

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Laura Petrella	(Depositor's name)
	(Signature)
September 26, 2007	(Date)

10/01/2007 TLUU22 0000012 10814533

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/814,533 03/31/2004 Kenjiro Ueda KYO.P0030 6893

TITLE OF INVENTION: APPARATUS, METHOD AND PROGRAM FOR DATA PROCESSING, AND APPARATUS, METHOD AND PROGRAM FOR TAMPER DETECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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non-provisional	NO	\$1400	\$300	\$0	\$1700	11/14/2007
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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PEESO, THOMAS R	2132	713-194000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Renner, Kenner

2 Greive, Bobak

3 Taylor & Weber

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Victor Company of Japan, Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)
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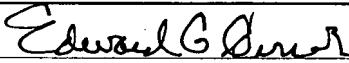
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 18-0987 (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date September 26, 2007

Typed or printed name

Edward G. Greive

Registration No. 24,726

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